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CONFIRMATION NO. 6159

<b>SERIAL NUMBER</b> 10/721,686	<b>FILING OR 371(c) DATE</b> 11/25/2003 <b>RULE</b>	<b>CLASS</b> 378	<b>GROUP ART UNIT</b> 2882	<b>ATTORNEY DOCKET NO.</b> 14XZ129714/130264 (GEMS-01)
<b>APPLICANTS</b> Francois Kotian, Guyancourt, FRANCE; Remy Klausz, Neuilly sur Seine, FRANCE; Yves Troussel, Palaiseau, FRANCE; Regis Vaillant, Villebon sur Yvette, FRANCE; Guillaume Calmon, Paris, FRANCE;				
<b>** CONTINUING DATA *****</b> <i>None</i>				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 02 14993 11/28/2002 <i>OK</i> FRANCE 03 06676 06/03/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/10/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and Acknowledged <i>OK</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 33
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 23413				
<b>TITLE</b> Method and apparatus for determining functional parameters in a radiological apparatus				
<b>FILING FEE RECEIVED</b> 1234	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	